

Lieutenant Governor

KRISTEN COX

Executive Director

Department of **Workforce Services**

CHRISTOPHER W. LOVE

Deputy Director

GREGORY B. GARDNER

Deputy Director

June 12, 2007

XXXXXX XXXXXXXXX West Valley City, UT 84119

Dear Mr. XXXXXX:

This letter serves as "Notice of Receipt and Acceptance" regarding the discrimination complaint you filed against the Department of Workforce Services (DWS). You allege you have been denied employment opportunities with the Department based on age and your work history, "having several jobs in the last few years." Your complaint will be accepted based on age. However, work history is not a covered basis of discrimination.

Complainants have the option of mediation or an investigation for complaint resolution. I have included a copy of the Mediation Election form with this Notice. The form includes an explanation of the DWS mediation process. Please note, the Mediation Election form must be completed and returned within 10 days of receipt of this notice. I have also included a self addressed, stamped envelope for your convenience. In the event mediation is chosen as a means of resolution, all parties will be contacted, in writing as to the time, date, and place of the session.

Should you choose investigation, the process will begin upon my receiving the form.

Sincerely,

Carolyn Parsons **Equal Opportunity Officer**

/enclosures

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